

**CITY OF CARMEL - CLAY TOWNSHIP
HAMILTON COUNTY, INDIANA**

**APPLICATION FOR BOARD OF ZONING APPEALS ACTION
APPEAL REQUEST**

Fee: \$138.50

DOCKET NO. _____ DATE RECEIVED: _____

1) Applicant: _____

Address: _____

2) Project Name: _____ Phone: _____

Engineer/Architect: _____ Phone: _____

Attorney: _____ Phone: _____

3) Applicant's Status: (Check the appropriate response)

_____ (a) The applicant's name is on the deed to the property

_____ (b) The applicant is the contract purchaser of the property

_____ (c) Other: _____

4) If Item 3) (c) is checked, please complete the following:

Owner of the property involved: _____

Owner's address: _____ Phone: _____

5) Record of Ownership:

Deed Book No./Instrument No. _____

Page: _____ Purchase date: _____

6) Common address of the property involved: _____

Legal description: _____

Tax Map Parcel No.: _____

7) State explanation of requested Appeal: (State what you want to do and cite the section number(s) of the Carmel/Clay Zoning Ordinance which applies and/or creates the need for this appeal).

8) State reasons supporting the Appeal: (Additionally, complete the attached question sheet entitled "Findings of Fact-Appeal").

- 9) Present zoning of the property (give exact classification): _____
- 10) Present use of the property: _____
- 11) Size of lot/parcel in question _____ acres
- 12) Describe the proposed use of the property _____

- 13) Is the property: Owner occupied _____
 Renter occupied _____
 Other _____
- 14) Are there any restrictions, laws, covenants, variances, special uses, or appeals filed in connection with this property that would relate or affect its use for the specific purpose of this application? If yes, give date and docket number, decision rendered and pertinent explanation.

- 15) Has work for which this application is being filed already started? If answer is yes, give details:

 Building Permit Number: _____

 Builder: _____
- 16) If proposed appeal is granted, when will the work commence? _____
- 17) If the proposed appeal is granted, who will operate and/or use the proposed improvement for which this application has been filed?

NOTE:

LEGAL NOTICE shall be published in the Indianapolis Star a MANDATORY twenty-five (25) days prior to the public hearing date. The certified "Proof of Publication" affidavit for the newspaper must be available for inspection the night of the hearing.

LEGAL NOTICE to all adjoining and abutting property owners is also MANDATORY, two methods of notice are recommended:

1) CERTIFIED MAIL - RETURN RECEIPT REQUESTED sent to adjoining property owners. (The white receipt should be stamped by the Post Office at least twenty-five (25) days prior to the public hearing date)

2) HAND DELIVERED to adjoining and abutting property owners (A receipt signed by the adjoining and abutting property owner acknowledging the twenty-five (25) day notice should be kept for verification that the notice was completed)

REALIZE THE BURDEN OF PROOF FOR ALL NOTICES IS THE RESPONSIBILITY OF THE APPLICANT. AGAIN, THIS TASK MUST BE COMPLETED AT LEAST TWENTY-FIVE (25) DAYS PRIOR TO PUBLIC HEARING DATE.

The applicant understands that docket numbers will not be assigned until all supporting information has been submitted to the Department of Community Services.

The applicant certifies by signing this application that he/she has been advised that all representations of the Department of Community Services are advisory only and that the applicant should rely on appropriate subdivision and zoning ordinance and/or the legal advice of his/her attorney.

ADJACENT PROPERTY OWNERS LIST

I, _____, Auditor of Hamilton County, Indiana, certify that the attached affidavit is a true and complete listing of the adjoining and adjacent property owners concerning Docket No. _____.

OWNER

ADDRESS

EXAMPLE ONLY:

Formal list request sheet & official list
may be acquired from the Hamilton
County Auditor's Office (776-8401).

Auditor of Hamilton County, Indiana

Date

AFFIDAVIT

I, being duly sworn depose and say that the foregoing signatures, statements and answers herein contained and the information herewith submitted are in all respects true and correct to the best of my knowledge and belief. I, the undersigned, authorize the applicant to act on my behalf with regard to this application and subsequent hearings and testimony.

Signed: _____
(Property Owner, Attorney, or Power of Attorney)

(Please Print)

STATE OF INDIANA

SS:

County of _____ Before me the undersigned, a Notary Public
(County in which notarization take place)

for _____ County, State of Indiana, personally appeared
(Notary Public's county of residence)

_____ and acknowledge the execution of the foregoing
(Property Owner, Attorney, or Power of Attorney)

instrument this _____ day of _____, 20_____

Notary Public--Signature

(SEAL)

Notary Public--Please Print

My commission expires: _____

**NOTICE OF PUBLIC HEARING BEFORE THE
CARMEL/CLAY BOARD OF ZONING APPEALS**

Docket No. _____

Notice is hereby given that the Carmel/Clay Board of Zoning Appeals meeting on the _____ day of _____, 200_____ at 6:00 pm in the City Council Chamber, 2nd floor of City Hall, One (1) Civic Square, Carmel, Indiana 46032 will hold a Public Hearing upon an Appeal of a decision rendered by the Director of the Department of Community Services to _____

property being known as _____.

The application is identified as Docket No. _____.

The real estate affected by said application is described as follows:

(Insert Legal Description)

All interested persons desiring to present their views on the above application, either in writing or verbally, will be given an opportunity to be heard at the above-mentioned time and place.

PETITIONERS

**PETITIONER'S AFFIDAVIT OF NOTICE OF PUBLIC HEARING
CARMEL/CLAY BOARD OF ZONING APPEALS**

I (WE) _____ DO HEREBY CERTIFY THAT A LEGAL
(Petitioner's Name)
NOTICE OF PUBLIC HEARING BEFORE THE CARMEL/CLAY BOARD OF ZONING APPEALS CONSIDERING
DOCKET NUMBER _____, WAS GIVEN AT LEAST TWENTY-FIVE (25) DAYS PRIOR
TO THE DATE OF THE PUBLIC HEARING TO THE BELOW LISTED OF ADJOINING AND ABUTTING PROPERTY
OWNERS:

OWNER

ADDRESS

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

STATE OF INDIANA

SS:

The undersigned, swear that the above information is in all respects is true and correct to the best of my knowledge and belief.

Signature of Petitioner

County of _____ Before me the undersigned, a Notary Public
(County in which notarization takes place)

for _____ County, State of Indiana, personally appeared
(Notary Public's county of residence)

_____ and acknowledge the execution of the foregoing instrument this
(Property Owner, Attorney, or Power of Attorney)

_____ day of _____, 200_____.

(SEAL)

Notary Public--Signature

Notary Public--Please Print

My commission expires:_____

CARMEL/CLAY BOARD OF ZONING APPEALS

Carmel, Indiana

Docket No. : _____

Petitioner: _____

FINDINGS OF FACT - APPEAL (Ballot Sheet)

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

DATED THIS _____ DAY OF _____, 20 ____.

Board Member

**CARMEL/CLAY BOARD OF ZONING APPEALS
CARMEL, INDIANA**

Docket No.: _____

Petitioner: _____

FINDINGS OF FACT - APPEAL

1. The Petitioner has (has not) properly followed the Appeals Procedures outlined in Ordinance Z-160, Section 30.2, et seq. except as follows:

2. Nature of action appealed from:

Agency: _____

Date of Agency Decision: _____

3. Attached copy of Ordinance or materials which is subject of Appeal as Petitioner because:

4. The written materials submitted to the Board does support the Petitioner because:

5. The Agency, Official, Board or Zoning District boundary should be affirmed.

6. The work on the premises upon which appeal has been filed shall not be stayed because:

DECISION

IT IS THEREFORE the decision of the Carmel/Clay Board of Zoning Appeals that Appeal Docket No. _____ is granted, subject to any conditions stated in the minutes of this Board, which are incorporated herein by reference and made a part hereof.

Adopted this _____ day of _____, 200 _____.

CHAIRPERSON, Carmel/Clay Board of Zoning Appeals

SECRETARY, Carmel/Clay Board of Zoning Appeals

Conditions of the Board are listed on the back.
(Petitioner or his representative to sign).